Application or Docket Number

## PATENT APPLICATION . . . DETERMINATION RECORD Effective October 1, 2001

| Ellective October 1, 2001  |  |                                 |                                |                                  |                   |  | 10-                    | 00       | 09, 78              | /                      |
|--|--|---------------------------------|--------------------------------|----------------------------------|-------------------|--|------------------------|----------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |                                 |                                |                                  |                   | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY |                        |          |                     |                        |
| TOTAL CLAIMS   |  |                                 |                                | . veri                           | The second second | RATE   | FEE                    | <b>7</b> | RATE                |                        |
| FOR  |  |                                 | NUMBER FILED NUME              |                                  | BER EXTRA         | BASIC F                                      | 2-9,                   | ,        |                     | FEE                    |
| TOTAL CHARGEABLE CLAIMS  |  |                                 | ,                              |                                  | DETERMA           | ·  |                        | OR       | BASIC FEE           | 740.00                 |
|  |  |                                 | / minus 20= *                  |                                  | 118               | X\$ 9=                                       |                        | OR       | X\$18=              |                        |
| INDEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM P   |  |                                 | / minus 3 =                    |                                  | X42=              |  | OR                     | X84=     |                     |                        |
| <u> </u>   |  |                                 |                                |                                  |                   | +140=  |                        | OR       | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column   |  |                                 |                                |                                  | column 2          | TOTAL  | 520                    | OR       | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  |  |                                 |                                |                                  |                   |  |                        | •        | OTHER               | THAN                   |
| (Column 1)   |  |                                 | 35 199 21                      | (Column 2)                       | (Column 3)        | SMALI  | ENTITY                 | OR       | SMALL               |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT |                                | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  | RATE   | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                               | Minus                          | **                               | =                 | X\$ 9=                                       |                        | OR       | X\$18=              |                        |
|  | Independent  | *                               | Minus                          | ***                              | =                 | X42=   |                        | OR       | X84=                |                        |
| Ц  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |                                |                                  |                   | +140=  |                        | UH       |                     |                        |
|  |  |                                 |                                |                                  |                   |  |                        | OR       | +280=               | ٠ .                    |
|  |  |                                 |                                |                                  |                   | TOTA<br>ADDIT. FEI                           |                        | OR       | TOTAL<br>ADDIT. FEE |                        |
|  | يراغوره مدرا والسم   | (Column 1)                      | Single of the service of grade | (Column 2)<br>HIGHEST            | (Column 3)        |  |                        |          |                     |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT |                                | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  | RATE   | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                               | Minus                          | **                               | =                 | X\$ 9=                                       |                        | OR       | X\$18=              |                        |
|  | Independent  | *                               | Minus                          | ***                              | =                 | X42=   |                        | OR       | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                 |                                |                                  |                   | 140  | 1                      |          |                     |                        |
|  |  |                                 |                                |                                  |                   | +140=  | <b>_</b>               | OR       | +280=               |                        |
|  |  |                                 |                                |                                  |                   | TOTAL<br>ADDIT. FEE                          |                        | OR       | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  |  |                                 |                                |                                  |                   |  |                        |          |                     |                        |
| AMENDMENT C  | the state of the s | REMAINING<br>AFTER<br>AMENDMENT |                                | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  | RÄTE   | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | *                               | Minus                          | **                               | =                 | X\$ 9=                                       |                        | OR       | X\$18=              |                        |
| ME   | Independent  | *                               | Minus                          | ***                              | =                 | X42=   | 1                      |          |                     |                        |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |                                |                                  |                   | A42=   |                        | OR       | X84=                |                        |
| +140=  |  |                                 |                                |                                  |                   |  |                        | OR       | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |  |                                 |                                |                                  |                   |  |                        |          | TOTAL               |                        |
| ,  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or ledgesodes) is the highest number found in the  |                                 |                                |                                  |                   |  |                        |          |                     |                        |